SERFF Tracking #: HUMA-129223304 State Tracking #: 10.6.13 Company Tracking #: MO-13-2013

State: Missouri Filing Company: Humana Insurance Company

TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name: HRDHL Individual Medicare Supplement Plans **Project Name/Number:** HRDHL Notice to Discontinue Plans/MO-13-2013

Filing at a Glance

Company: Humana Insurance Company

Product Name: HRDHL Individual Medicare Supplement Plans

State: Missouri

TOI: MS08I Individual Medicare Supplement - Standard Plans 2010

Sub-TOI: MS08I.012 Multi-Plan 2010

Filing Type: Form

Date Submitted: 09/26/2013

SERFF Tr Num: HUMA-129223304 SERFF Status: Closed-FILED

State Tr Num: 10.6.13 State Status: FILED

Co Tr Num: MO-13-2013

Implementation On Approval

Date Requested:

Author(s): Michele Zabel, Paula Williamson, Bettina Ponds, Tiffany Turner, Chi Dang, Shawn Farnsley,

Steve Polio

Reviewer(s): John Howser (primary)

Disposition Date: 10/03/2013
Disposition Status: FILED

Implementation Date:

State Filing Description:

6., will process applications until 10.26.13

SERFF Tracking #: HUMA-129223304 State Tracking #: 10.6.13 Company Tracking #: MO-13-2013

State: Missouri Filing Company: Humana Insurance Company

TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name: HRDHL Individual Medicare Supplement Plans **Project Name/Number:** HRDHL Notice to Discontinue Plans/MO-13-2013

General Information

Project Name: HRDHL Notice to Discontinue Plans Status of Filing in Domicile: Not Filed

Project Number: MO-13-2013

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Overall Rate Impact: Filing Status Changed: 10/03/2013

State Status Changed: 10/03/2013

Deemer Date: Created By: Tiffany Turner

Submitted By: Tiffany Turner Corresponding Filing Tracking Number:

State TOI: MS08I Individual Medicare Supplement - Standard

Plans 2010

Filing Description:

RE: Notice to Discontinue Offer of Medicare Supplement Plans Humana Insurance Company/NAIC #119, 73288/FEIN 39-1263473

This letter is to advise you that Humana Insurance Company has discontinued the availability of the following referenced Medicare Supplement insurance policy forms which were approved by your office on September 21, 2011, SERFF Filing HUMA-127200666.

Policy Forms affected by this notice: MOMESRDA, MOMESRDF, MOMESRDF (HD), MOMESRDK, and MOMESRDL.

Applications dated September 17, 2013 and after will not be accepted. Humana will continue to provide on-going services to the existing members of these policies.

If you have any guestions regarding this notice, please contact me at (502) 580-8249 or mzabel@humana.com.

Company and Contact

Filing Contact Information

Tiffany Turner, Compliance Analyst tturner2@humana.com 500 W Main 502-580-1570 [Phone]

NCT 29

Louisville, KY 40202

Filing Company Information

Humana Insurance Company CoCode: 73288 State of Domicile: Wisconsin 1100 Employers Boulevard Group Code: 119 Company Type: Life & Health

Green Bay, WI 54344 Group Name: State ID Number:

(800) 558-4444 ext. [Phone] FEIN Number: 39-1263473

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00

SERFF Tracking #: HUMA-129223304 State Tracking #: 10.6.13 Company Tracking #: MO-13-2013

State: Missouri Filing Company: Humana Insurance Company

TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name: HRDHL Individual Medicare Supplement Plans **Project Name/Number:** HRDHL Notice to Discontinue Plans/MO-13-2013

Retaliatory? No

Fee Explanation: Bills are sent on the first of each month.

State Specific

If your policy forms contain variable TEXT (brackets or other means denoting variation), please indicate the total number of policy form variations that your company intends to generate, based on the variable TEXT. (This EXCLUDES sales projections, and any variable dollar amounts.) Please review DIFP Filing Guidelines at

http://insurance.mo.gov/industry/filings/lh/index.php for additional guidance regarding the use of variable text in policy form filings. If there is no variable text in your policy form(s), please indicate "no variable text". DIFP will accept the following responses to this question: a digit; the phrase "no variable text"; the phrase "n/a" if the filing is rates, reports, advertising, or Medicare supplement forms. Please do not put an explanation of variability in this field. Please attach that separately in an explanation of variability under the "Supporting Documentation" tab. Please call the L&H Manager at 573-526-0672 with any questions.: no variable text